

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Local Voices	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00531624 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee NCC Media			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>		
Mailing Address 405 Lexington Ave., 6th Floor			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">42500.00</div>		
City New York	State NY	Zip Code 10174	Transaction ID : D531841 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>		
Purpose of Expenditure Media time buy		Category/ Type	Name of Federal Candidate Clinton, Hillary, R, ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">82316.84</div>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)			Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>		

Full Name of Payee Facebook			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>		
Mailing Address 1 Hacker Way			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>		
City Menlo Park	State CA	Zip Code 94025-1456	Transaction ID : D529062 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>		
Purpose of Expenditure Digital media buy - estimated cost		Category/ Type	Name of Federal Candidate Clinton, Hillary, R, ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">82316.84</div>	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)			Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>		

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">47500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

King, Houston, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 05 / 2016

Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee WBBH-TV		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 3719 Central Ave		Amount 7500.00	
City Fort Myers	State FL	Zip Code 33901	Transaction ID : D531843
Purpose of Expenditure Media time buy	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 04 / 2016	
Name of Federal Candidate Clinton, Hillary, R, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Bar-Lev, Amir, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 419 Sterling Place		Amount 337.29	
City Brooklyn	State NY	Zip Code 11238	Transaction ID : D531842
Purpose of Expenditure Production shoot costs	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 04 / 2016	
Name of Federal Candidate Clinton, Hillary, R, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7837.29
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	55337.29

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*King, Houston, , ,**[Electronically Filed]*

Date

MM / DD / YYYY
11 / 05 / 2016

Signature